

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	2D	C-1369	11/27/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Date
Final	5/12 5/8
Original	5/20 5/30 5/5 5/8 5/13
1	✓ ✓ ✓ ✓
2	✓
3	✓ ✓
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6	✓
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18	✓
19	✓
20	✓ ✓
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23	✓ ✓
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31	✓ ✓
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34	✓ ✓
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37	✓ ✓ ✓
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39	✓ ✓ ✓
40	✓
41	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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